

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000047504

Entity Name: DR. MOGHADDAM, LLC

Current Principal Place of Business:

527 NE 124 TH ST
NORTH NIANI, FL 33161

Current Mailing Address:

527 NE 124 TH ST
NORTH NIANI, FL 33161

FEI Number: 76-0815322

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOLDEN, RICHARD AESQ
1175 NE 125TH STREET
SUITE 512
NORTH MIAMI, FL 33161 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name MOGHADDAM, HAMIDREZA M.D.
Address 527 NE 124 ST
City-State-Zip: NORTH MIAMI FL 33161

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HAMIDREZA MOGHADDAM

MD

03/09/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date